

08/13/01

**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 442211

First Inventor Muhammad A. Sharaf

Title SPECTRAL CALIBRATION OF FLUORESCENT  
POLYNUCLEOTIDE SEPARATION APPARATUS

Express Mail Label No. EL 782 733 021 US

**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

**ADDRESS TO:**Assistant Commissioner for Patents  
Box Patent Application  
Washington, DC 20231

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)  
(Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.  
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 33]  
(preferred arrangement set forth below)  
- Descriptive title of the Invention  
- Cross References to Related Applications  
- Statement Regarding Fed sponsored R & D  
- Reference to sequence listing, a table, or a computer program listing appendix  
- Background of the Invention  
- Brief Summary of the Invention  
- Brief Description of the Drawings (if filed)  
- Detailed Description  
- Claim(s)  
- Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 4]
5. Oath or Declaration [Total Pages 2]  
a. ☒ Unexecuted  
b. ☐ Copy from a prior application (37 C.F.R. § 1.63(d))  
(for continuation/divisional with Box 18 completed)  
i. ☐ **DELETION OF INVENTOR(S)**  
Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(b)(2) and 1.33(b).
6. ☒ Application Data Sheet. See 37 CFR 1.76.

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  
a. ☐ Computer Readable Copy (CRF)  
b. Specification Sequence Listing on:  
i. ☐ CD-ROM or CD-R (2 copies); or  
ii. ☐ paper  
c. ☐ Statement verifying identity of above copies

**ACCOMPANYING APPLICATION PARTS**

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 C.F.R. § 3.73(b) Statement ☐ Power of Attorney  
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)
15. ☐ Certified copy of Priority Document(s) (if foreign priority is claimed)
16. ☐ Certified Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other:

18. If a **CONTINUING APPLICATION**, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☒ Continuation-in-part (CIP) of prior application No. **09 / 154,178** filed **Sept. 16, 1998**

Prior application information:

Examiner: **J. Starsiak**Group Art Unit: **1743**

For **CONTINUATION OR DIVISIONAL APPS** only: The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuing or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been specifically identified from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

☒ Customer Number or Bar Code Label **22896 22896** (Insert Customer No. or Bar Code Label here) or ☐ Correspondence address below

Name	Jeffery D. Frazier				
Address	Applied Biosystems 850 Lincoln Centre Drive				
City	Foster City	State	California	Zip Code	94404
Country	US	Telephone	650-570-6667	Fax	650-638-6677

Name (Print/Type)	Jeffery D. Frazier	Registration No. (Attorney/Agent)	34,601
Signature		Date	Aug. 10, 2001

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**FEE TRANSMITTAL  
for FY 2001**

Patent fees are subject to annual revision.

**Complete if Known**

Application Number	To be assigned
Filing Date	August 10, 2001
First Named Inventor	Muhammad A. Sharaf
Examiner Name	To be assigned
Group Art Unit	To be assigned
Attorney Docket No.	442211

TOTAL AMOUNT OF PAYMENT (\$ 1030)

**METHOD OF PAYMENT (check one)**

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to

Deposit Account Number 01-2213  
Deposit Account Name Applied Biosystems

- ☒ Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17  
☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:  
☐ Check ☐ Credit card ☐ Money ☐ Other Order

**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101	710	201	Utility filing fee	710
106	320	206	Design filing fee	
107	490	207	Plant filing fee	
108	710	208	Reissue filing fee	
114	150	214	Provisional filing fee	
<b>SUBTOTAL (1)</b>				<b>(\$ 710)</b>

**2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from Table	Fee Paid
18	20**	0	0
Independent Claims	7	3**	30
Multiple Dependent			0

\*\*or number previously paid, if greater. For Reissues, see below

Large Entity Small Entity	Fee Code (\$)	Fee Code (\$)	Fee Description
103	18	203	Claims in excess of 20
102	80	202	Independent claims in excess of 3
104	270	204	Multiple dependent claim, if not paid
109	80	209	** Reissue independent claims over original patent
110	18	210	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 320)

**FEE CALCULATION (continued)****3. ADDITIONAL FEES****Large Entity Small Entity**

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
105	130	205	65
127	50	227	25
139	130	139	130
147	2520	147	2520
112	920*	112	920*
113	1840*	113	1840*
115	110	215	55
116	390	216	195
117	890	217	445
118	1390	218	695
128	1890	228	945
119	310	219	155
120	310	220	155
121	270	221	135
138	1510	138	1510
140	110	240	55
141	1240	241	620
142	1240	242	620
143	440	243	220
144	600	244	300
122	130	122	130
123	50	123	50
126	180	126	180
581	40	581	40
146	710	246	355
149	710	249	355
179	710	279	355
159	900	159	900

Other fee (specify) \_\_\_\_\_

\* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 0)

**SUBMITTED BY**Name (Print/Type) Jeffery D. Frazier

Registration No. (Attorney/Agent)

34,601

**Complete (if applicable)**Telephone 650-638-6722Signature Jeffery D. FrazierDate Aug. 10, 2001**WARNING:**

Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.